

**Title: New graduate midwives'
experiences of their transition
support programs**

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Master of Midwifery (Hons)

CERTIFICATE OF AUTHORSHIP/ORIGINALITY

I certify that the work in this thesis has not previously been submitted for a degree nor has it been submitted as part of requirements for a degree except as fully acknowledged within the text.

I also certify that the thesis has been written by me. Any help that I have received in my research work and the preparation of the thesis itself has been acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis.

Signature of Student

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Contents

<i>Abstract</i>	<i>1</i>
<i>Chapter 1: INTRODUCTION</i>	<i>3</i>
<i>INTRODUCTION</i>	<i>3</i>
<i>SETTING THE CONTEXT FOR THE STUDY</i>	<i>5</i>
<i>AIM</i>	<i>6</i>
<i>Signposting the Journey</i>	<i>6</i>
<i>SUBJECTIVITY AND LOCALITY OF THE RESEARCHER</i>	<i>9</i>
<i>My personal motivation for asking undertaking this research</i>	<i>9</i>
<i>CONCLUSION</i>	<i>10</i>
<i>CHAPTER 2: LITERATURE REVIEW</i>	<i>12</i>
<i>INTRODUCTION</i>	<i>12</i>
<i>BACKGROUND: RHETORIC VERSUS REALITY</i>	<i>12</i>
<i>FACTORS THAT CAN INFLUENCE THE TRANSITION OF THE NEWLY GRADUATED</i>	<i>16</i>
<i>EXPECTATIONS AND EXPERIENCES</i>	<i>18</i>
<i>The new graduate</i>	<i>18</i>
<i>The expectations of experienced midwives</i>	<i>21</i>
<i>COMPETENCE AND CONFIDENCE</i>	<i>23</i>
<i>CONTEXT AND ENVIRONMENT</i>	<i>27</i>
<i>PERSONAL AND PROFESSIONAL SUPPORT</i>	<i>31</i>
<i>Mentoring</i>	<i>31</i>
<i>Feedback</i>	<i>36</i>
<i>CONCLUSION</i>	<i>39</i>
<i>Chapter 3: RESEARCH DESIGN</i>	<i>40</i>

INTRODUCTION	40
<i>Justification for employing a qualitative descriptive approach</i>	40
AIM	44
RESEARCH DESIGN	45
<i>Setting</i>	45
<i>Phase One</i>	46
<i>Phase Two</i>	46
<i>Participants</i>	47
<i>Recruitment procedure</i>	47
<i>Time 1</i>	47
<i>Time 2</i>	48
<i>Focus groups</i>	50
<i>Data collection</i>	51
<i>Phase Three</i>	54
<i>Participants</i>	54
<i>Recruitment procedure</i>	55
<i>Participant characteristics</i>	55
Data Analysis	56
Trustworthiness	58
Ethical issues and the consent process	61
Conclusion	62
 Chapter 4: Exploration and Discussion of Transition Support Programs for Newly Graduated Midwives in three Area Health Services	 64
Introduction	64
Overview of the Transition Support Programs on offer within the three Area Health Services	64
Documented objectives of the Transition Support Program	66
Information provided to the midwives	67
Elements of the transition support programs	68

<i>Summary</i>	79
<i>Midwives' expectations of their Transition Support Programs</i>	81
<i>What I understand about my Transition Support Program</i>	81
<i>What I want to achieve from my Transition Support Program</i>	82
<i>What I need in a Transition Support Program to achieve my goals</i>	87
<i>Summary</i>	90
<i>Conclusion</i>	90
 <i>Chapter 5: The Newly Graduated Midwives' Experiences of Their Transition Support Programs</i>	
<i>Programs</i>	91
<i>Introduction</i>	91
<i>The maternity care context</i>	92
<i>The elements of the Transition Support Program</i>	94
<i>Clinical rotations: difficult when the plan was changed</i>	97
<i>Supernumerary time: highly valued but not always available</i>	99
<i>The birth suite: a stressful experience</i>	101
<i>Study days: a popular aspect of the program</i>	102
<i>Support: the importance of relationships with colleagues</i>	103
<i>Midwifery continuity of care models: an added bonus for some</i>	110
<i>Receiving feedback: a supportive interaction</i>	112
<i>Did the Transition Support Programs meet the midwives' needs?</i>	114
<i>Experienced midwives' perceptions of the differences between the Bachelor of Midwifery and postgraduate midwives</i>	117
<i>Conclusion</i>	119
 <i>Chapter 6: Discussion</i>	121
<i>Introduction</i>	121
<i>Newly graduated midwives' expectations of transition support programs: the importance of attitude</i>	122

<i>Availability of transition support programs: the rhetoric</i>	125
<i>Accessing transition support</i>	125
<i>Ensuring the quality of transition support programs: the need for standardisation</i>	126
<i>The reality of transition support programs: newly graduated midwives' descriptions and experiences of the core elements</i>	129
<i>The programs – an overview</i>	129
<i>Clinical rotations: providing adequate clinical experience for midwives?</i>	130
<i>The realities of the clinical environment: poor skill mix, high workload</i>	139
<i>Support: a multifaceted concept</i>	142
<i>Recommendations</i>	149
<i>Recommendations for education</i>	150
<i>Recommendations for practice</i>	150
<i>Recommendations for future research</i>	152
<i>Limitations of this study</i>	152
<i>Conclusion</i>	153
<i>References</i>	178

Table of Appendices

Appendix 1	155
Appendix 2	156
Appendix 3	158
Appendix 4	159
Appendix 5	160
Appendix 6	162
Appendix 7	163
Appendix 8	164
Appendix 9	165
Appendix 10	167
Appendix 11	168
Appendix 12	170
Appendix 13	171

Appendix 14	172
Appendix 15	173
Appendix 16	174
Appendix 17	175
Appendix 18	177

Table of Figures and Tables

<i>Figure 1. Example of emerging theme.....</i>	<i>58</i>
<i>Table 1. Models for professional support.....</i>	<i>35</i>
<i>Table 2. A summary of Phase Two new graduate midwife recruitment.....</i>	<i>50</i>
<i>Table 3. Number of midwives employed in 2008 and availability of transition support programs.....</i>	<i>65</i>
<i>Table 4. Allocation of clinical rotations and study days for the midwives.....</i>	<i>70</i>
<i>Table 5. Flexibility of TSPs and opportunities to work in midwifery continuity of care models.....</i>	<i>72</i>
<i>Table 6 Summary of the debriefing and feedback opportunities provided to the midwives.....</i>	<i>79</i>
<i>Table 7. The elements of transition support programs experienced by the midwives</i>	<i>96</i>
<i>Table 8. Did the midwives feel supported in their Transition Support Programs?</i>	<i>115</i>
<i>Table 9. Did the midwives feel they had achieved their goals through their Transition Support Program? ...</i>	<i>116</i>
<i>Table 10. Number of midwives leaving hospital of employment during transition year.....</i>	<i>117</i>

ABSTRACT

Background: The transition from student to registered midwife is a critical period for a new graduate. The literature suggests that well-designed ‘transition support programs’ (TSPs) assist graduates to successfully take up their roles as registered clinicians. While TSPs for midwives exist in NSW, Australia, there appears to be an adhoc approach to their design, implementation and effectiveness.

Aim: To identify the type of support offered to newly graduated midwives during their transition year and to increase knowledge and understanding of new midwives’ expectations and experiences of this support.

Method: This descriptive qualitative study was undertaken in three phases. In phase one 14 maternity hospitals within three Sydney Area Health Services (AHS) provided details of their TSPs. In phase two, 31 newly graduated midwives participated in telephone interviews (18 at the beginning of their transition year and 29 at the end). An additional 7 participated in focus groups. In phase three interviews with 16 experienced midwives canvassed perceptions of the support their facility offered the new graduates. Latent and manifest content analysis was used to analyse the data.

Findings: The approach to transition support varied across and within AHSs: some sites offered no program. Whilst differences existed between the TSPs they shared common elements such as clinical rotations and study days. At the beginning of their TSP midwives expected that the opportunities provided to them would consolidate their knowledge and clinical skills. In addition they expected to be supported by colleagues to gain confidence. On completion of their transition period, some midwives’ experiences were at odds with the details of the programs initially outlined by the AHSs. The discrepancy between the expected and actual program resulted in increased stress and anxiety for midwives, especially in birth suite. Midwives were critical of the lack of promised supernumerary time

as well as limited access to midwifery continuity of care models. While approximately 60% believed that they had met their goals and been well supported more than 16% of the midwives had left their TSP before the end of their first year of clinical practice.

Conclusion: This study has provided a unique insight into the expectations and experiences of midwives as they start their professional careers. It has also provided much needed information on the structure and content of programs offered within three AHSs. It is anticipated that the findings will provide evidence to assist in the development of TSPs that successfully meet the needs of the graduate, the childbearing women they care for and the organisations in which they work.